

PART B - FEE(S) TRANSMITTAL

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7590 11/06/2009
William L. Androlia
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William L. Androlia	Reg. No. 27,177	(Depositor's name)
		(Signature)
January 21, 2010		(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/579,848	05/17/2006	Shoji Hidaka	19A 3787 PCT	5488

TITLE OF INVENTION: DEVICE FOR APPLYING FOAMED HOT MELT ADHESIVE, AND METHOD FOR SELECTIVELY APPLYING FOAMED HOT MELT ADHESIVE AND SOLID HOT MELT ADHESIVE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$1055	02/08/2010
EXAMINER	ART UNIT	CLASS-SUBCLASS				
NICOLAS, FREDERICK C	3754	222-190000				

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 WILLIAM L. ANDROLIA
2 H. HENRY KODA
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SUNTOOL CORPORATION

OSAKA, JAPAN

01 FC:2501

755.00 OP

02 ED:1524

369.00 OP

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

- Issue Fee
 Publication Fee (No small entity discount permitted)
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-4367 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date 1/21/10

Typed or printed name William L. Androlia

Registration No. 27,177

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